File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



2010 OCT 19 AM 8: 52

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE	
COMMITTEE NAME (Must be same as on Statement of Organization)	
FEDLER FOR REPRESENTATIVE	FORM
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue	DR-2 (Rev. 07/2007) DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:	Comm #
Candidate Name	Logged in
DEMOCRAT	Scanned
Office Sought	Computer
REPRESENTATIVE District (if Senate of House)	Audited
Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and SIGNATURE OF PERSON FILING REPORT 319-837-6174 TELEPHONE	
TELEPHONE	DATE SIGNED
I AM FILING A Oct. 14, 20/0 REPORT FOR (1) ELECTION /(2)NO Indicate by # 1	ON-ELECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED Local C	committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)	& Local Committees, enter County in lection is held
WHICH	ection is neig
	nection is neid
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the	
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the	
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the	
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STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H). (Schedule H applies to Candidates' Committees Only) SUB-TOTAL \$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
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STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	2,370.00 -0- -0- 3,973.64 3,879.47
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STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$"UNPAID BILLS (From Schedule D - Attach Schedule D) \$"UNPAID BILLS (From Schedule D - Attach Schedule E)	1,603.64 2,370.00 -0- -0- 3,973.64 3,879.47 -0- 94.17
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STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$"UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$"OUTSTANDING LOANS (From Schedule G Attached?) ANDIDATE COMMITTEES ONLY:	1,603.64 2,370.00 -0- -0- 3,973.64 3,879.47 -0- 94.17
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

FEDLER FOR REPRESENTATIVE

set Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF VOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
(MM/DD/YR)	AND PAC CHECK		TO CANDIDATE* (if applicable)	RECEIVED	FUND.
·	NUMBER		(ii oppicable)	1	RAISER INCOME
	ID# 6060	JOWA COMMITTEE ON POLITICAL			
_	014	EDUCATION AFL-CIO 2000 WALKER SUITE A		\$	
7-19-10	2685	DES MOINES, IA 503/7		100.00	<u> </u>
	ID#	RONALD E. OSBORNE		/ 00/00	
_	CK#	102 ORCHARD LN			
8-16-10	CK# 7466	NEW LONDON IA 52645		100,00	L
	ID#	LUELLA C, DINGMAN	· · · · · · · · · · · · · · · · · · ·		
	CK#	3005 ROYAL FOX DRIVE			i li
9-2-10	OIN#	ST. CAARLES, IL. GO174		150,00	L
	ID# 9672	DIUMBERCA DIRE EITTERS LONGI			
_	CV#	112 C POLITICAL EDUCATION FUND			
9-6-10	1383	1339 16Th AVE SW CEPAR RAPIPS, IAS 2404-1755		1,000,06	L
	ID#	ANN M. BENDLAGE		'/'	
	CK# / 0 = 1	620 AVE C			
9-20-10	6871	WEST POINT, IA 52656		20.00	L
7.	ID#	MARLENE K. HILL		0.0.0	
	CK#,	1104 E MONROF			
9-21-10	2246	MT. PLEASANT, IA 52641		50.00	
, , ,	ID#	N. P. FRAISE	W-2-4-V	0	
	CK# 010	GIY STARLITE DRIVE		_	
9-24-10	7/59	WEST POINT, IA 52656		50,00	
, , , , ,	ID#	BONALD FULLENKAMP			
	CV#				1 1
7-25-10	CK# 8839	WEST POINT, IA 52656		25,00	
	-D# 6439	COOR POLICE THE GTATE		7.5.	
_		OF JOWA COPE FUND 6200 AURORA AVE SUITE SOSE URBANDALE, JA 50322			
9-25-10	CK# 2082	GOOD AURORA HUE SUITE 303 -		100.00	
	ID#	MIKE ANDERSON		-	
	0141	102 GTh ST			
10-1-10	CASH	WEST POINT IA 52656		20.00	L
	011277	1 1 1 C C C C C	SUB-TOTAL		
				\$1,615.00	
		TOTAL (if last page of	of this schedule)		
				\$	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ___3___

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

COMMITTEE NAME (Musi	be same as	on Statement of Organization)
		REPRESENTATIVE

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
-	CHE	CK THIS BOX IF VDING FORM

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Г	DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	I PELATIONICUES	1 41401415	7
1	RECEIVED	(if applicable)	TO THE PRODUCTION OF CONTINED FOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND
	(MM/DD/YR)	AND PAC CHECK		(if applicable)	NEOLIVED	RAISER
-		NUMBER			1	INCOME
1		ID#	FAYE FRAISE			
Ι.		CK# made	P.O. BOX177		\$	
L	10-1-10		WEST POINT, IA 52656		50.00	
		ID#	DEBORAH A. BATY			
1.		CK#	509 E.WASHINGTON ST			
1/6	0-1-10	CK#/7771	MT. PLEASANT, IA 52641		50.00	الـــــــــــا
		ID#	CARLIEEN KROGMEIER		0.11	<u> </u>
1		047	51 S.A. ST			اسرا
1/	5-1-10	CK#6047			20 00	
r	, , ,	ID#	WEST POINT, FA 52656		30.00	
			RICK LARKIN		j	
11	7-1-10	ск# 28689	1304 AUE B		50.00	
K	7-1-10	D#	FT. MADISON, TA 52627		20.00	
		1 ∪#	EUCENE FRAISE			
Ι,	ا ۸ ــ ۱ ـ م	CK#	1699 230 th AVE		ا دم ما	
1/4	0-1-10		FT. MADISON IA 52627		50.00	
1		ID#	LARRY HOLTKAMP			
1.	. ,	CK# ~~	188) 303 md AVE			1
1/	7-1-10	CK# 8750	FT. MADISON . TA 52627		20,00	
Γ		ID#	FREDERICH J. KLOPFER 307 & WASHINGTON ST			
		CK# 4/00	307 E WASHINGTON ST			
110	5-1-10	CK# 2692	MT. PLEASANT, TA 52641		50.00	
		ID#	BOIN OSBORINE			
			102 ORCHARD LM			1
1//	0-1-10	CK# 7497	NEW LONDON, IA 52645		100.00	<u> </u>
 	, , , ,	- 7 1 /			, 00.00	
1-			GERALD DINGMAN			11
١,,	5-1-17	ск# 5952	2493 260 xh ST		25,00	
1/4	5-140	<u> </u>	NEW LONDON, IA 52645		042,00	
1		1U#	MARTHA STEFFENSMEIER			
۱,	ا مر م	CK# 22~C	207 Gth ST		1	
10	1-5-10	^{СК#} 3372	WEST POINT, IA 52656	•	2000	
		· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	41112	
			÷		\$445.00	
		•	TOTAL (if last page of	of this schedule)		
					Ų.	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 3 (for Schedule A)

For Instructions, See Back of Form	COUEDINE
	SCHEDULE A MONETARY (Rev. 07/03) RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) FEDLER FOR REPRESENTATIVE	CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
(MM/DD/YR)	(if applicable) AND PAC CHECK		TO CANDIDATE* (if applicable)	RECEIVED	FUND.
· · ·	NUMBER		(ii applicable)		RAISER INCOME
	ID#	BRIAN CARTER			
h e in	CK# - ~	200 W WEBSTER		\$	1
0-5-10	CK# 7514	MT. PLEASANT, IA526 4/		60.00	,
	" 9098	MT. PLEASANT, IA 526 4/ IBEW EDUCATIONAL COMMENTS 900 SEVENTH ST. N.W.	E		
0-7-10	CK# 21287	900 SEVENTA ST. N.W.		2500	
0- 1-10	1D#	WASHINGTON, D.C. 20001		250.00	
	1D#				
	CK#			1	
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	ID#				
	CK#			j	
÷			SUB-TOTAL	02/05	
		TOTAL (if last page of	of this schedule)	\$,3/0,00	
		TO THE (II last page t	n ans scriedule)	\$ 2,370.00	

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Page 3 of 3 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Deret Power		
Reset Form	SCHEDULE	
COUNT	B (Rev. 07/03)	MONETARY EXPENDITUR
		L

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

FEDLER FOR REPRESENTATIVE

		1101110001		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
(CHECK NUMBER			
	ID#	U.S. POST OFFICE		
9-14-10	CK# 1067	WEST POINT, IA 52656	STAMPS	\$ 88.00
·	ID#	EVENING DEMOGRAT	NGWS PAPER	
9-21-10	CK# 1068	1226 AVE H FT.MADISON, TASS627	ADVERTISING	597,00
	ID#	WINFIELD BEACON	NEWS PAPER	
9-22-10	CK#1069	P.O. BOV F WINFIELD, IA 52659	ADVERT ISING	143,00
	ID#	MT. PLEASANT NEWS 215 W MONROE ST	NEWS PAPER	
9-22-10	CK# 1070	MT. PLEASANT, IA.5264)	ADVERTISING	177.20
	ID#	KILT RADIO	BADIO	
9-29-10	CK# 1071	P.O. BOX 311 MT. PLEASANT. DA52641	ADVERTISING	600,00
	ID#	PILOT GROVE BANK	HOVER! 70 THE	000100
10-6-10	CK# DEBIT	WEST POINT, IA 52656	CAMPAICN CHECKS	5,35
	i	EVENING DEMOCRAT	NEWS PAPER	
10-7-10	UN IAMA	1226 AVE H FT. MADISON, IA52627	ADVERTISING	450.00
	ID#	WINFIELD BEACON	NEWS PAPER	,,,,,
10-8-10	IKMO	P.O. BOD F WINFIELD, IA 52659	ADVERTISING	143,00
			SUB-TOTAL	\$2,203.53
		•	TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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SCHEDULE B	MONETARY		
(Rev. 07/03)	EXPENDITURES		
CHECK THIS BOX IF AMENDING FORM			

COMMITTEE NAME (Must be same as on Statement of Organization)

FEDLER FOR REPRESENTATIVE

PEUL	ER PO		77772	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	, AMOUNT EXPENDED
p.	ID#	MT. PLEASANT NEWS 215 W MONROE ST	NEWS PAPER	•
10-8-10	CK# /0ワゾ	MT. PLEASANT, IA52641	ADVERTISING	\$179.92
	ID#	KILT RADIO	BADIO	
10-11-10	CK#/075	MT. PLEASANT, IA 52641	ADVERTISING	1,000.00
	ID#	THE BONNY BAYER P. O. BOX 6	NEWS PAPER	
10-12-10	CK# 1076	WEST POINT IASAGE	ADVERTISING	212.00
	ID#	NEW LONDON JOURNEL 138 WEST MAIN	NEWS PAPER	,
10-14-10	CK# /077	NEW LONDON, IA 52645	ADVERTISING	84.00
	ID#	KILJ BADIO P.O. BOX 311	BADIO	
1074-10	CK#/078	MT. PLEASANTIA	ADVERTISING	200.00
	ID#	,	_	
	CK#			
	ID#			
·	CK#		-	
	ID#			
	CK#			
		<u></u>	SUB-TOTAL	\$1,425.92

TOTAL (if last page of this schedule)

*1,673,42 \$3,879,47

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail Itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 2 of 2

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (M	ust be same as on	Statement of O	Organization)	·
FEDLER	FOR	AFR	Organization) RESENTATIV	
		11101	MESEN/ATIV	<u> </u>

SCHEDULE

E IN-KIND
(Rev. 06/97) CONTRIBUTIONS

CHECK THIS BOX IF
AMENDING FORM

iReseal of the

DATE RECEIVED	NAME OF THE PROPERTY OF THE PR	RELATIONSHIP	DESCRIPTION		
(MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE * (if applicable)	OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER
	BON FEDLER 206 6th ST RO. BOX396	THE	CHILF- EDLO	\$	CONTRIBUTION
10-1-10	WEST POINT, PASSIGE	CHNEDIDATE	MEAT SAND. WICHES-AND BEVERAGES	60.00	
,					
				·	
			·		
		\$			
		60.00			
	TOTAL (if last page of this				
		60.00			

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____ (for Schedule E)